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COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 1905

SERIAL NUMBER 09/651,880	FILING DATE 08/30/2000 RULE	CLASS 345	GROUP ART UNIT 2671	ATTORNEY DOCKET NO. MSI-546US
APPLICANTS Stephen Marschner, Kirkland, WA; Brian K Guenter, Redmond, WA; Sashi Raghupathy, Redmond, WA; Kirk Olynyk, Redmond, WA; Sing Bing Kang, Redmond, WA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/26/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>James W. Sealey</i> Allowance Examiner's Signature Initials		STATE OR COUNTRY WA	SHEETS DRAWING 20	TOTAL CLAIMS 51
INDEPENDENT CLAIMS 7				
ADDRESS 22801				
TITLE Methods and systems for animating facial features, and methods and systems for expression transformation				
FILING FEE RECEIVED 1560	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Bib Data Sheet

SERIAL NUMBER 09/651,880	FILING DATE 08/30/2000 RULE -	CLASS 382	GROUP ART UNIT 2621	ATTORNEY DOCKET NO. MSI-546US
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APPLICANTS

Stephen Marschner, Kirkland, WA ;
Brian K Guenter, Redmond, WA ;
Sashi Raghupathy, Redmond, WA ;
Kirk Olynyk, Redmond, WA ;
Sing Bing Kang, Redmond, WA ;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 10/26/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 20	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Lance W. Sadleir</i> Initials: <i>ZW</i>				

ADDRESS

Lance R Sadle
Lee & Hayes PLLC
421 W Riverside Avenue
Suite 500
Spokane, WA 99201

TITLE

Methods and systems for animating facial features, and methods and systems for expression transformation

FILING FEE RECEIVED 1560	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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